# PRA Disclosure Statement

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# **Overview**

States are required to demonstrate, and Centers for Medicare and Medicaid Services (CMS) has accepted a reasonal Payment Limit (UPL) based on a comparison of Medicaid (MCD) payments to equivalent Medicare (MCR) payment of Medicare principles. CMS has developed guidance documents to help states meet statutory and regulatory required downloaded from:

http://www.medicaid.gov/medicaid-chip-program-information/by-topics/financing-and-reimbursement/accountab

CMS is also introducing templates specific to each service and demonstration type, which have been developed to a requirements and increase comparability across states. This workbook contains templates for the nursing facility UF

For each facility, please complete one of the following templates:

- NF Cost for cost-based demonstrations (e.g., routine per diem x Medicaid covered days)
- NF RUGs for Medicare Resource Utilization Groups (RUGs) -based demonstrations (acuity adjusted price-based de
- NF Per Diem for alternative demonstrations (e.g., case-mix adjusted Medicare payment per diem x Medicaid cove

States may apply different UPL formulas for state government owned or operated facilities, non-state government of facilities and private facilities; however, the formula should be consistently applied to each provider within the cate facility should only be included in one type of UPL demonstration. In filling out these templates, data for each indivincluded on a separate row. Additionally, all supplemental payments made by the state should be reported for ear reported separate from regular Medicaid payments. There may be instances where a variable is not applicable to y Please leave these variables blank.

## **Information Requested:**

Within each nursing facility UPL template, CMS requests the following information for each nursing facility:

- **Demonstration Information** asks for basic information such as the state, demonstration rate year, service type (no demonstration type (cost, RUGs, Per Diem)
- **Provider Identification** asks for provider identification numbers and names for each facility included, the ownersh non-state government owned, state-government owned), and whether the facility is classified as urban or rural
- Medicare Cost, RUGs, or Other Data for Base Period asks for Medicare base year data relevant to the calculation
- Medicaid Payment and Utilization Data for Base Period asks for Medicaid utilization data used to calculate the UI payment data that is used to determine whether or not the state has made payments in excess of the UPL
- Medicaid Payments Inflated to Demonstration Year asks for inflationary or volume adjustment data that are made changes in the Medicaid program that have occurred between the base and current rate year periods
- UPL Calculation & Inflation to Demonstration Year instructs the state to calculate the UPL and asks for inflationar appropriately trend UPL data from the base to the current rate year
- Adjustments to UPL asks for other adjustments to the UPL that are not included in the UPL calculation (e.g., provide demonstrations)
- Calculation of UPL Gap instructs the state to calculate the UPL gap for each facility by subtracting (adjusted/inflate from the calculated UPL

<u>Payment and Cost Data:</u> Enter to the nearest dollar (i.e. \$1,234,567.89 should be entered as \$1,234,568) <u>Proportion and Percentage Data:</u> Enter with no more than four decimal places (i.e., 0.12345 should be entered as 0.12345 should be 0.12345 should be

Detailed descriptions for each variable are provided in the next sheet labeled "Data Dictionary." A hypothetical n also been entered for each template to provide guidance regarding the data requested for each column.

### Table 1. CMS UPL Nursing Facility Template Data Dictionary

Variable numbering scheme is used for internal identification of each variable and is not meant to be presented in numerical order

		Variable numbering scheme is used for i	internal identification of each variable and is not meant to be presented in numerical order	
Variable Number	Variable Format	Short Description	Long Description	Variable Status
100	2-character text	State	2-character state ID (e.g., Maryland = MD)	0: Variables Included in All NF Templates
101	4-digit number	State Demonstration Rate Year	State demonstration rate year (e.g., 2014)	0: Variables Included in All NF Templates
102	2-character text	Service Type	Service type: NF= nursing facility	0: Variables Included in All NF Templates
104	Text	Demonstration Type (Cost, RUGs, Per Diem)	Demonstration type (Cost= Cost-based; RUGs= MCR Resource Utilization Group Payment-based; Polem= Per Diem-based (e.g., case-mix adjusted payment per diem)	
105	Text	Other State Provider ID Number	State provider ID number that is not a MCD ID number (if applicable)	0: Variables Included in All NF Templates
112	6-digit number	MCR Certification Number (MCR ID)	MCR ID Number	0: Variables Included in All NF Templates
	-			
107	Text	State-specific Provider ID (MCD ID)	MCD ID number	0: Variables Included in All NF Templates
108	Text	Provider Name	Provider name	0: Variables Included in All NF Templates
109	10-11 digit number	National Provider ID (NPI)	National Provider Identification Number	0: Variables Included in All NF Templates
110	Text	Ownership Category Type (Private, NSGO, SGO)	Ownership category type (private= private; NSGO= non-state government owned; SGO= state government owned)	0: Variables Included in All NF Templates
115	Text	Urban / Rural Location	MCR payment classification (Urban, Rural)	0: Variables Included in All NF Templates
300.1	Date [DD/MM/YYYY]	Time Period of MCD Days - Begin Date	Beginning date of base year MCD days (note: for cost-based demonstration, date should match MC Cost Report data period)	O: Variables Included in All NF Templates
300.2	Date [DD/MM/YYYY]	Time Period of MCD Days - End Date	End date of base year MCD days (note: for cost-based demonstration, date should match MCR Cos Report data period)	o: Variables Included in All NF Templates
310	Number	MCD Days	MCD days corresponding to time period specified in Variables 300.1 and 300.2, used in calculating the UPL for the base period	0: Variables Included in All NF Templates
311.1	Date [DD/MM/YYYY]	Time Period of MCD Rates - Begin Date	Beginning date of MCD rates used to determine total MCD payments for purposes of comparing to the UPL	0: Variables Included in All NF Templates
311.2	Date [DD/MM/YYYY]	Time Period of MCD Rates - End Date	End date of MCD rates used to determine total MCD payments for purposes of comparing to the UPL	0: Variables Included in All NF Templates
312	\$ Amount	MCD Regular Payment Per Diem	MCD regular payments per diem applicable to the dates specified in Variables 311.1 and 311.2	0: Variables Included in All NF Templates
313.1	\$ Amount	MCD Supplemental Payment Per Diem	MCD supplemental payments per diem applicable to the dates specified in Variables 311.1 and 311	1.2 0: Variables Included in All NF Templates
313.2	\$ Amount	MCD Supplemental Payment Per Diem - GME / Training	MCD supplemental payments per diem applicable to the dates specified in Variables 311.1 and	0: Variables Included in All NF Templates
313.3	\$ Amount	MCD Supplemental Payment Per Diem - Other	311.2 (GME=Graduate Medical Education / Training)  MCD supplemental payments per diem applicable to the dates specified in Variables 311.1 and 311.2 (Other)	0: Variables Included in All NF Templates
			Adjustment to MCD payments per diem to account for services paid separately outside of the MCD	
314.1	\$ Amount	Adjustment to MCD Per Diem #1	NF rate, but reimbursed under the SNF PPS=Skilled Nursing Facility Prospective Payment System (e.g., drugs, therapy, lab, radiology)	0: Variables Included in All NF Templates
314.2	\$ Amount	Adjustment to MCD Per Diem #2	Adjustment to MCD payments per diem to account for services paid separately outside of the MCI NF rate, but reimbursed under the SNF PPS (e.g., drugs, therapy, lab, radiology)	0: Variables Included in All NF Templates
317	\$ Amount	Total MCD Regular and Supplemental Per Diem with Adjustments	Calculated as MCD Regular Payment Per Diem (Variable 312) + MCD Supplemental Payment Per Diem (Variable 313.1) + MCD Supplemental Payment GME/Training Per Diem (Variable 313.2) + MCD Supplemental Payment Other Per Diem (Variable 313.3) + Adjustment to MCD Per Diem #1 (Variable 314.1) + Adjustment to MCD Per Diem #2 (Variable 314.2)	0: Variables Included in All NF Templates
307	Text	MCD Inflation Factor Type	Description of MCD payment trend factor used to reflect changes in the MCD program between th base and current rate year periods (e.g., Market Basket)	0: Variables Included in All NF Templates
308	Proportion	MCD Inflation Factor	Cumulative MCD payment trend factor used to reflect changes in the MCD program between the base and current rate year periods (note: 1.00= no change) (use "mid-point to mid-point approach	") 0: Variables Included in All NF Templates
309	Proportion	Other Adjustment to MCD Payments	Cumulative other adjustment (e.g., volume adjustment) factor used to reflect changes in the MCD program between the base and current rate year periods (note: 1.00= no change) (use "mid-point mid-point approach")	to 0: Variables Included in All NF Templates
315	\$ Amount	Inflated / Adjusted MCD Payment Per Diem	Calculated as Total MCD Regular and Supplemental Per Diem with Adjustments (Variable 317) x MCD Inflation Factor (Variable 308) x Other Adjustment to MCD Payments (Variable 309)	0: Variables Included in All NF Templates
316	\$ Amount	Total MCD Payments (Per Diem * Days)	Calculated as Inflated / Adjusted MCD Payment Per Diem (Variable 315) x MCD Days (Variable 310)	0: Variables Included in All NF Templates
404	Text	UPL Inflation Factor Type	Description of trend factor used to inflate the UPL Per Diem Amount from the base year to the rate year (e.g., Market Basket)	e 0: Variables Included in All NF Templates
405	Proportion	UPL Inflation Factor	Cumulative trend factor used to inflate the Calculated MCD UPL Per Diem from the base year to th rate year (note: 1.00= no change) (use "mid-point to mid-point approach")	e 0: Variables Included in All NF Templates
400	\$ Amount	Inflated / Adjusted UPL Per Diem	Calculated Inflated / Adjusted UPL Per Diem based on instructions provided in spreadsheet (e.g., fc cost-based demonstration: base year Adjusted Cost Per Diem (Variable 215) x UPL Inflation Factor (Variable 405)	
406	\$ Amount	Inflated UPL Amount	Calculated as Inflated / Adjusted UPL Per Diem (Variable 400) x MCD Days (Variable 310)	0: Variables Included in All NF Templates

a Dictionary

Inpatient Hospital Upper Payment Limit (UPL) Data Template
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Variable Number	Variable Format	Short Description	Long Description	Variable Status
402	\$ Amount	Other Adjustments to the UPL Amount	Adjustments made to the UPL that are not otherwise accounted for in the UPL calculation (e.g., adjustments for managed care transition)	0: Variables Included in All NF Templates
403	\$ Amount	Adjusted MCD UPL Amount	Calculated as Inflated UPL Amount (Variable 406) + Other Adjustments to the UPL Amount (Variable 402) [+ MCD Provider Tax Cost (Variable 401) for cost-based demonstrations]	0: Variables Included in All NF Templates
407	\$ Amount	UPL Gap Amount	Calculated as Adjusted MCD UPL Amount (Variable 403) - Inflated MCD Payments to Demonstration Year (Variable 316)	0: Variables Included in All NF Templates
408	\$ Amount	Adjustment to the UPL Gap	Adjustments made to the UPL gap that are not otherwise accounted for in MCD payments or the UPL calculation	0: Variables Included in All NF Templates
409	\$ Amount	Adjusted UPL Gap	Calculated as UPL Gap Amount (Variable 407) + Adjustment to the UPL Gap (Variable 408)	0: Variables Included in All NF Templates
215	\$ Amount	Adjusted Cost Per Diem	Calculated as Per Diem Costs (Variable 211) + Adjustments to MCR Per Diem #1 (Variable 212.1) + Adjustments to MCR Per Diem #2 (Variable 212.2)	1: Variables Included in NF Cost Template But NOT Included Across All NF Templates
401	\$ Amount	MCD Provider Tax Cost	For cost-based demonstrations, MCD provider tax costs can be added to the UPL separately	1: Variables Included in NF Cost Template But NOT Included Across All NF Templates
217	Text	MCR RUGs Type / Version	MCR RUG Type / Version used for assigning SNF PPS rates as defined by the number of groups (e.g., 44, 66)	2: Variables Included in NF RUGs Template But NOT Included Across All NF Templates
218.1	Date [DD/MM/YYYY]	MCR RUGs Rate - Effective Begin Date	Beginning date of the MCR RUGs rate used for the purposes of calculating the UPL	2: Variables Included in NF RUGs Template But NOT Included Across All NF Templates
218.2	Date [DD/MM/YYYY]	MCR RUGs Rate - Effective End Date	End date of the MCR RUGs rate used for the purposes of calculating the UPL	2: Variables Included in NF RUGs Template But NOT Included Across All NF Templates
210	Number	MCR Days	Specify MCR days if used in calculation of RUGS rates	2: Variables Included in NF RUGs Template But NOT Included Across All NF Templates
216	\$ Amount	Average MCR RUGs Rate Per Diem	Weighted average MCR RUGs rate per diem for MCD days priced at SNF PPS rates	2: Variables Included in NF RUGs Template But NOT Included Across All NF Templates
219.1	\$ Amount	Adjustment #1 to RUGs Rate	Adjustment to MCR Per Diem to account for services not included in the MCR SNF rate but reimbursed by the MCD program (e.g., leave of absence days)	2: Variables Included in NF RUGs Template But NOT Included Across All NF Templates
219.2	\$ Amount	Adjustment #2 to RUGs Rate	Adjustment to MCR Per Diem to account for services not included in the MCR SNF rate but reimbursed by the MCD program (e.g., leave of absence days)	2: Variables Included in NF RUGs Template But NOT Included Across All NF Templates
207	Proportion	MCR Case Mix Index (CMI)	Average MCR Case Mix Index (CMI) for the facility (if used to calculate the UPL)	3: Variables Included in NF Per Diem Template But NOT Included Across All NF Templates
305	Proportion	MCD Case Mix Index (CMI)	Average MCD Case Mix Index (CMI) for the facility	3: Variables Included in NF Per Diem Template But NOT Included Across All NF Templates
410	\$ Amount	Calculated MCD UPL Per-diem	Calculated as Adjusted Per Diem Payments (Variable 222) x [MCD Case Mix Index (Variable 305) / MCR Case Mix Index (Variable 305)]	3: Variables Included in NF Per Diem Template But NOT Included Across All NF Templates

Data Dictionary 5

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2	Database Description &	State	State Demonstration Rate Year	Service Type	Demonstration Type	Other State Provider ID Number	National Provider ID (NPI)	Medicare Certification Number (Medicare ID)	State-specific Provider ID (Medicaid ID)	Provider Name	Ownership Category Type	Urban / Rural Location
	Variable Number	[100]	[101]	[102]	[104]	[105]	[109]	[112]	[107]	[108]	[110]	[115]
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2	Database Description &	State	State Demonstration Rate Year	Service Type	Demonstration Type	Other State Provider ID Number	National Provider ID (NPI)	Medicare Certification Number (Medicare ID)	State-specific Provider ID (Medicaid ID)	Provider Name	Ownership Category Type	Urban / Rural Location
	Variable Number	[100]	[101]	[102]	[104]	[105]	[109]	[112]	[107]	[108]	[110]	[115]
3	EXAMPLE	MD	2015	NF	Cost	RA53433	1234567890	210000	65745234	EXAMPLE NURSING FACILITY	Private	Urban
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2	Database Description &	State	State Demonstration Rate Year	Service Type	Demonstration Type	Other State Provider ID Number	National Provider ID (NPI)	Medicare Certification Number (Medicare ID)	State-specific Provider ID (Medicaid ID)	Provider Name	Ownership Category Type	Urban / Rural Location
	Variable Number	[100]	[101]	[102]	[104]	[105]	[109]	[112]	[107]	[108]	[110]	[115]
3	EXAMPLE	MD	2015	NF	Cost	RA53433	1234567890	210000	65745234	EXAMPLE NURSING FACILITY	Private	Urban
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2	Database Description &	State	State Demonstration Rate Year	Service Type	Demonstration Type	Other State Provider ID Number	National Provider ID (NPI)	Medicare Certification Number (Medicare ID)	State-specific Provider ID (Medicaid ID)	Provider Name	Ownership Category Type	Urban / Rural Location
	Variable Number	[100]	[101]	[102]	[104]	[105]	[109]	[112]	[107]	[108]	[110]	[115]
3	EXAMPLE	MD	2015	NF	Cost	RA53433	1234567890	210000	65745234	EXAMPLE NURSING FACILITY	Private	Urban
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2	Database Description &	State	State Demonstration Rate Year	Service Type	Demonstration Type	Other State Provider ID Number	National Provider ID (NPI)	Medicare Certification Number (Medicare ID)	State-specific Provider ID (Medicaid ID)	Provider Name	Ownership Category Type	Urban / Rural Location
	Variable Number	[100]	[101]	[102]	[104]	[105]	[109]	[112]	[107]	[108]	[110]	[115]
3	EXAMPLE	MD	2015	NF	Cost	RA53433	1234567890	210000	65745234	EXAMPLE NURSING FACILITY	Private	Urban
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2	Database Description &	State	State Demonstration Rate Year	Service Type	Demonstration Type	Other State Provider ID Number	National Provider ID (NPI)	Medicare Certification Number (Medicare ID)	State-specific Provider ID (Medicaid ID)	Provider Name	Ownership Category Type	Urban / Rural Location
	Variable Number	[100]	[101]	[102]	[104]	[105]	[109]	[112]	[107]	[108]	[110]	[115]
3	EXAMPLE	MD	2015	NF	Cost	RA53433	1234567890	210000	65745234	EXAMPLE NURSING FACILITY	Private	Urban
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### Nursing Facility Upper Payment Limit (UPL) Data Template

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2	Database	Demo Info: State	Demo Info:  State Demonstration Rate Year	Demo Info: Service Type	Demo Info:  Demonstration Type	Provider Info: Other State Provider ID Number	Provider Info: National Provider ID (NPI)	Medicare Certification Number	Provider Info: State-specific Provider ID (Medicaid ID)	Provider Info: Provider Name	Provider Info:  Ownership Category Type	Provider Info: Urban / Rural Location
	Description & Variable Number	[100]	[101]	[102]	[104]	[105]	[109]	(Medicare ID) [112]	[107]	[108]	[110]	[115]
3	EXAMPLE	MD	2015	NF	Cost	RA53433	1234567890	210000	65745234	EXAMPLE NURSING FACILITY	Private	Urban
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5         6         7         8         9         10         11         12         13         14         15         16         17         18         19         20         21         22         23         24         25         30         30         34         35         36         37         38         39         40         41         42		7/1/2012	6/30/2013	Filed	\$210.11	\$2.51	\$0.67	\$213.29	7/1/2012	6/30/2013	3,124	7/1/2014	6/30/2015	\$185.00
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2	Medicare Cost Report Begin Date	Medicare Cost Report End Date	Medicare Cost Report Filing Status	Medicare Per Diem	Adjustments to Medicare Per Diem #1	Adjustments to Medicare Per Diem #2	Adjusted Per Diem Costs	Time Period of Medicaid Days - Begin Date	Time Period of Medicaid Days - End Date	Medicaid Days	Time Period of Medicaid Rates - Begin Date	Time Period of Medicaid Rates - End Date	Medicaid Regular Payment Per Diem
	[200.1]	[200.2]	[202]	[211]	[212.1]	[212.2]	[215]	[300.1]	[300.2]	[310]	[311.1]	[311.2]	[312]
3	7/1/2012	6/30/2013	Filed	\$210.11	\$2.51	\$0.67	\$213.29	7/1/2012	6/30/2013	3,124	7/1/2014	6/30/2015	\$185.00
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2	Medicare Cost Report Begin Date	Medicare Cost Report End Date	Medicare Cost Report Filing Status	Medicare Per Diem	Adjustments to Medicare Per Diem #1	Adjustments to Medicare Per Diem #2	Adjusted Per Diem Costs	Time Period of Medicaid Days - Begin Date	Time Period of Medicaid Days - End Date	Medicaid Days	Time Period of Medicaid Rates - Begin Date	Time Period of Medicaid Rates - End Date	Medicaid Regular Payment Per Diem
	[200.1]	[200.2]	[202]	[211]	[212.1]	[212.2]	[215]	[300.1]	[300.2]	[310]	[311.1]	[311.2]	[312]
3	7/1/2012	6/30/2013	Filed	\$210.11	\$2.51	\$0.67	\$213.29	7/1/2012	6/30/2013	3,124	7/1/2014	6/30/2015	\$185.00
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2	Medicare Cost Report Begin Date	Medicare Cost Report End Date	Medicare Cost Report Filing Status	Medicare Per Diem	Adjustments to Medicare Per Diem #1	Adjustments to Medicare Per Diem #2	Adjusted Per Diem Costs	Time Period of Medicaid Days - Begin Date	Time Period of Medicaid Days - End Date	Medicaid Days	Time Period of Medicaid Rates - Begin Date	Time Period of Medicaid Rates - End Date	Medicaid Regular Payment Per Diem
	[200.1]	[200.2]	[202]	[211]	[212.1]	[212.2]	[215]	[300.1]	[300.2]	[310]	[311.1]	[311.2]	[312]
3	7/1/2012	6/30/2013	Filed	\$210.11	\$2.51	\$0.67	\$213.29	7/1/2012	6/30/2013	3,124	7/1/2014	6/30/2015	\$185.00
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1/2   1/2	2	Report Begin	Report End	Report Filing	Medicare Per Diem	Adjustments to Medicare Per Diem #1	to Medicare	Adjusted Per Diem Costs	Medicaid Days -	Medicaid Days - End	Medicaid Days	Medicaid Rates -	Medicaid Rates -	Medicaid Regular Payment Per Diem
2001		[200.1]	[200.2]	[202]	[211]	[212.1]	[212.2]	[215]	[300.1]	[300.2]	[310]	[311.1]	[311.2]	[312]
200		7/1/2012	6/30/2013	Filed	\$210.11	\$2.51	\$0.67	\$213.29	7/1/2012	6/30/2013	3,124	7/1/2014	6/30/2015	\$185.00
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2	Medicare Cost Report Begin Date	Medicare Cost Report End Date	Medicare Cost Report Filing Status	Medicare Per Diem	Adjustments to Medicare Per Diem #1	Adjustments to Medicare Per Diem #2	Adjusted Per Diem Costs	Time Period of Medicaid Days - Begin Date	Time Period of Medicaid Days - End Date	Medicaid Days	Time Period of Medicaid Rates - Begin Date	Time Period of Medicaid Rates - End Date	Medicaid Regular Payment Per Diem
	[200.1]	[200.2]	[202]	[211]	[212.1]	[212.2]	[215]	[300.1]	[300.2]	[310]	[311.1]	[311.2]	[312]
3	7/1/2012	6/30/2013	Filed	\$210.11	\$2.51	\$0.67	\$213.29	7/1/2012	6/30/2013	3,124	7/1/2014	6/30/2015	\$185.00
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### Nursing Facility Upper Payment Limit (UPL) Data Template

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2	Medicare Cost Report Begin Date	Medicare Cost Report End Date	Medicare Cost Report Filing Status	Medicare Per Diem	Adjustments to Medicare Per Diem #1	Adjustments to Medicare Per Diem #2	Adjusted Per Diem Costs	Time Period of Medicaid Days - Begin Date	Time Period of Medicaid Days - End Date	Medicaid Days	Time Period of Medicaid Rates - Begin Date	Time Period of Medicaid Rates - End Date	Medicaid Regular Payment Per Diem
	[200.1]	[200.2]	[202]	[211]	[212.1]	[212.2]	[215]	[300.1]	[300.2]	[310]	[311.1]	[311.2]	[312]
3	7/1/2012	6/30/2013	Filed	\$210.11	\$2.51	\$0.67	\$213.29	7/1/2012	6/30/2013	3,124	7/1/2014	6/30/2015	\$185.00
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	Medicaid	Medicaid	Medicaid	Adjustment to	Adjustment to	Total Medicaid Regular
2	Supplemental	Supplemental	Supplemental	Medicaid Per Diem	Medicaid Per Diem	and Supplemental Per
	Payment Per Diem	Payment Per Diem	Payment Per Diem	#1	#2	Diem with Adjustments
		(GME/Training)	(Other)			
	[313.1]	[313.2]	[313.3]	[314.1]	[314.2]	[317]
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3	\$4.80	\$4.80	\$4.80	\$1.20	\$0.00	\$200.60
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	MCD Payment and Utilization Info:	MCD Payment and Utilization Info:	MCD Payment and Utilization Info:	MCD Payment and Utilization Info:	MCD Payment and Utilization Info:	MCD Payment and Utilization Info:
2	Medicaid Supplemental Payment Per Diem	Medicaid Supplemental Payment Per Diem (GME/Training)	Medicaid Supplemental Payment Per Diem (Other)	Adjustment to Medicaid Per Diem #1	Adjustment to Medicaid Per Diem #2	Total Medicaid Regular and Supplemental Per Diem with Adjustments
	[313.1]	[313.2]	[313.3]	[314.1]	[314.2]	[317]
3	\$4.80	\$4.80	\$4.80	\$1.20	\$0.00	\$200.60
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	Medicaid	Medicaid	Medicaid	Adjustment to	Adjustment to	Total Medicaid Regular
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	Payment Per Diem	Payment Per Diem	Payment Per Diem	#1	#2	Diem with Adjustments
		(GME/Training)	(Other)			
	[040.4]	[0.40.0]	[0.40.0]	[0444]	[0440]	[047]
	[313.1]	[313.2]	[313.3]	[314.1]	[314.2]	[317]
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3	\$4.80	\$4.80	\$4.80	\$1.20	\$0.00	\$200.60
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	rayillelit rei Dielli	(GME/Training)	(Other)	π1	π2	Diem with Aujustments
		(GIVIL/ IT all lilig)	(Other)			
	[313.1]	[313.2]	[313.3]	[314.1]	[314.2]	[317]
	[010.1]	[010.2]	[010.0]	[011.1]	[011.2]	[017]
3	\$4.80	\$4.80	\$4.80	\$1.20	\$0.00	\$200.60
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2	Medicaid Supplemental Payment Per Diem	Medicaid Supplemental Payment Per Diem (GME/Training)	Medicaid Supplemental Payment Per Diem (Other)	Adjustment to Medicaid Per Diem #1	Adjustment to Medicaid Per Diem #2	Total Medicaid Regular and Supplemental Per Diem with Adjustments
	[313.1]	[313.2]	[313.3]	[314.1]	[314.2]	[317]
3	\$4.80	\$4.80	\$4.80	\$1.20	\$0.00	\$200.60
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	MCD Payment and Utilization Info:	MCD Payment and Utilization Info:	MCD Payment and Utilization Info:	MCD Payment and Utilization Info:	MCD Payment and Utilization Info:	MCD Payment and Utilization Info:
2	Medicaid Supplemental Payment Per Diem	Medicaid Supplemental Payment Per Diem (GME/Training)	Medicaid Supplemental Payment Per Diem (Other)	Adjustment to Medicaid Per Diem #1	Adjustment to Medicaid Per Diem #2	Total Medicaid Regular and Supplemental Per Diem with Adjustments
	[313.1]	[313.2]	[313.3]	[314.1]	[314.2]	[317]
3	\$4.80	\$4.80	\$4.80	\$1.20	\$0.00	\$200.60
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2	Medicaid Supplemental Payment Per Diem	Medicaid Supplemental Payment Per Diem (GME/Training)	Medicaid Supplemental Payment Per Diem (Other)	Adjustment to Medicaid Per Diem #1	Adjustment to Medicaid Per Diem #2	Total Medicaid Regular and Supplemental Per Diem with Adjustments
	[313.1]	[313.2]	[313.3]	[314.1]	[314.2]	[317]
3	\$4.80	\$4.80	\$4.80	\$1.20	\$0.00	\$200.60
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2	MCD Inflation Factor Type	MCD Inflation Factor	Other Adjustment to Medicaid Payments	Inflated / Adjusted Medicaid Payment Per Diem	Total Medicaid Payments	UPL Inflation Factor Type	UPL Inflation Factor	Inflated / Adjusted UPL Per Diem	Inflated UPL Amount - UPL Per Diem * Medicaid Days	Medicaid Provider Tax Cost	Other Adjustments to the UPL Amount	Adjusted Medicaid UPL Amount	UPL Gap Amount	Adjustment to the UPL Gap	Adjusted UPL Gap
	[307]	[308]	[309]	[315]	[316]	[404]	[405]	[400]	[406]	[401]	[402]	[403]	[407]	[408]	[409]
3	None	1.000	1.000	\$200.60	\$626,674	Market Basket	1.055	\$225.02	\$702,965	\$130,000	\$0	\$832,965	\$206,291	\$0	\$206,291
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	MCD Inflated Payment Info:	MCD Inflated Payment Info:	Payment Info:	MCD Inflated Payment Info:	MCD Inflated Payment Info:	UPL Calc Info:	UPL Calc Info:	UPL Calc Info:	UPL Calc Info:	UPL Adjustment Info:	UPL Adjustment Info:	UPL Adjustment Info:	UPL Gap Info:	UPL Gap Info:	UPL Gap Info:
2	MCD Inflation Factor Type	MCD Inflation Factor	Other Adjustment to Medicaid Payments	Inflated / Adjusted Medicaid Payment Per Diem	Total Medicaid Payments	UPL Inflation Factor Type	UPL Inflation Factor	Inflated / Adjusted UPL Per Diem	Inflated UPL Amount - UPL Per Diem * Medicaid Days	Medicaid Provider Tax Cost	Other Adjustments to the UPL Amount	Adjusted Medicaid UPL Amount	UPL Gap Amount	Adjustment to the UPL Gap	Adjusted UPL Gap
	[307]	[308]	[309]	[315]	[316]	[404]	[405]	[400]	[406]	[401]	[402]	[403]	[407]	[408]	[409]
3	None	1.000	1.000	\$200.60	\$626,674	Market Basket	1.055	\$225.02	\$702,965	\$130,000	\$0	\$832,965	\$206,291	\$0	\$206,291
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2	MCD Inflation Factor Type	MCD Inflation Factor	Other Adjustment to Medicaid Payments	Inflated / Adjusted Medicaid Payment Per Diem	Total Medicaid Payments	UPL Inflation Factor Type	UPL Inflation Factor	Inflated / Adjusted UPL Per Diem	Inflated UPL Amount - UPL Per Diem * Medicaid Days	Medicaid Provider Tax Cost	Other Adjustments to the UPL Amount	Adjusted Medicaid UPL Amount	UPL Gap Amount	Adjustment to the UPL Gap	Adjusted UPL Gap
	[307]	[308]	[309]	[315]	[316]	[404]	[405]	[400]	[406]	[401]	[402]	[403]	[407]	[408]	[409]
3	None	1.000	1.000	\$200.60	\$626,674	Market Basket	1.055	\$225.02	\$702,965	\$130,000	<b>\$</b> 0	\$832,965	\$206,291	<b>\$</b> 0	\$206,291
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	MCD Inflated Payment Info:	MCD Inflated Payment Info:	MCD Inflated Payment Info:	MCD Inflated Payment Info:	MCD Inflated Payment Info:	UPL Calc Info:	UPL Calc Info:	UPL Calc Info:	UPL Calc Info:	UPL Adjustment Info:	UPL Adjustment Info:	UPL Adjustment Info:	UPL Gap Info:	UPL Gap Info:	UPL Gap Info:
2	MCD Inflation Factor Type	MCD Inflation Factor	Other Adjustment to Medicaid Payments	Inflated / Adjusted Medicaid Payment Per Diem	Total Medicaid Payments	UPL Inflation Factor Type	UPL Inflation Factor	Inflated / Adjusted UPL Per Diem	Inflated UPL Amount - UPL Per Diem * Medicaid Days	Medicaid Provider Tax Cost	Other Adjustments to the UPL Amount	Adjusted Medicaid UPL Amount	UPL Gap Amount	Adjustment to the UPL Gap	Adjusted UPL Gap
	[307]	[308]	[309]	[315]	[316]	[404]	[405]	[400]	[406]	[401]	[402]	[403]	[407]	[408]	[409]
3	None	1.000	1.000	\$200.60	\$626,674	Market Basket	1.055	\$225.02	\$702,965	\$130,000	\$0	\$832,965	\$206,291	<b>\$</b> 0	\$206,291
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	MCD Inflated Payment Info:	MCD Inflated Payment Info:	MCD Inflated Payment Info:	MCD Inflated Payment Info:	MCD Inflated Payment Info:	UPL Calc Info:	UPL Calc Info:	UPL Calc Info:	UPL Calc Info:	UPL Adjustment Info:	UPL Adjustment Info:	UPL Adjustment Info:	UPL Gap Info:	UPL Gap Info:	UPL Gap Info:
2	MCD Inflation Factor Type	MCD Inflation Factor	Other Adjustment to Medicaid Payments	Inflated / Adjusted Medicaid Payment Per Diem	Total Medicaid Payments	UPL Inflation Factor Type	UPL Inflation Factor	Inflated / Adjusted UPL Per Diem	Inflated UPL Amount - UPL Per Diem * Medicaid Days	Medicaid Provider Tax Cost	Other Adjustments to the UPL Amount	Adjusted Medicaid UPL Amount	UPL Gap Amount	Adjustment to the UPL Gap	Adjusted UPL Gap
	[307]	[308]	[309]	[315]	[316]	[404]	[405]	[400]	[406]	[401]	[402]	[403]	[407]	[408]	[409]
3	None	1.000	1.000	\$200.60	\$626,674	Market Basket	1.055	\$225.02	\$702,965	\$130,000	\$0	\$832,965	\$206,291	<b>\$</b> 0	\$206,291
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	MCD Inflated Payment Info:	MCD Inflated Payment Info:	Payment Info:	MCD Inflated Payment Info:	MCD Inflated Payment Info:	UPL Calc Info:	UPL Calc Info:	UPL Calc Info:	UPL Calc Info:	UPL Adjustment Info:	UPL Adjustment Info:	UPL Adjustment Info:	UPL Gap Info:	UPL Gap Info:	UPL Gap Info:
2	MCD Inflation Factor Type	MCD Inflation Factor	Other Adjustment to Medicaid Payments	Inflated / Adjusted Medicaid Payment Per Diem	Total Medicaid Payments	UPL Inflation Factor Type	UPL Inflation Factor	Inflated / Adjusted UPL Per Diem	Inflated UPL Amount - UPL Per Diem * Medicaid Days	Medicaid Provider Tax Cost	Other Adjustments to the UPL Amount	Adjusted Medicaid UPL Amount	UPL Gap Amount	Adjustment to the UPL Gap	Adjusted UPL Gap
	[307]	[308]	[309]	[315]	[316]	[404]	[405]	[400]	[406]	[401]	[402]	[403]	[407]	[408]	[409]
3	None	1.000	1.000	\$200.60	\$626,674	Market Basket	1.055	\$225.02	\$702,965	\$130,000	\$0	\$832,965	\$206,291	\$0	\$206,291
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### Nursing Facility Upper Payment Limit (UPL) Data Template

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2	MCD Inflated	MCD Inflated Payment Info:	MCD Inflated Payment Info: Other	MCD Inflated Payment Info: Inflated / Adjusted Medicaid Payment Per Diem	MCD Inflated Payment Info: Total Medicaid Payments			UPL Calc Info:		UPL Adjustment Info: Medicaid Provider Tax Cost	UPL Adjustment Info:	UPL Adjustment Info: Adjusted Medicaid UPL Amount	UPL Gap Info:	UPL Gap Info:	UPL Gap Info: Adjusted UPL Gap
3	None	1.000	1.000	\$200.60	\$626,674	Market Basket	1.055	\$225.02	\$702,965	\$130,000	\$0	\$832,965	\$206,291	\$0	\$206,291
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		Demo Info:	Demo Info:	Demo Info:	Demo Info:	Provider Info:		Provider Info:	Provider Info:	Provider Info:	Provider Info:	Provider Info:
2	Database Description &	State	State Demonstration Rate Year	Service Type	Demonstration Type	Other State Provider ID Number	National Provider ID (NPI)	Medicare Certification Number (Medicare ID)	State-specific Provider ID (Medicaid ID)	Provider Name	Ownership Category Type	Urban / Rural Location
	Variable Number	[100]	[101]	[102]	[104]	[105]	[109]	[112]	[107]	[108]	[110]	[115]
3	EXAMPLE	MD	2015	NF	RUGs	RE03045	1234567890	210000	40534954	EXAMPLE NURSING FACILITY	NSGO	Rural
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2	Database Description &	State	State Demonstration Rate Year	Service Type	Demonstration Type	Other State Provider ID Number	National Provider ID (NPI)	Medicare Certification Number (Medicare ID)	State-specific Provider ID (Medicaid ID)	Provider Name	Ownership Category Type	Urban / Rural Location
	Variable Number	[100]	[101]	[102]	[104]	[105]	[109]	[112]	[107]	[108]	[110]	[115]
3	EXAMPLE	MD	2015	NF	RUGs	RE03045	1234567890	210000	40534954	EXAMPLE NURSING FACILITY	NSGO	Rural
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2	Database Description &	State	State Demonstration Rate Year	Service Type	Demonstration Type	Other State Provider ID Number	National Provider ID (NPI)	Medicare Certification Number (Medicare ID)	State-specific Provider ID (Medicaid ID)	Provider Name	Ownership Category Type	Urban / Rural Location
	Variable Number	[100]	[101]	[102]	[104]	[105]	[109]	[112]	[107]	[108]	[110]	[115]
3	EXAMPLE	MD	2015	NF	RUGs	RE03045	1234567890	210000	40534954	EXAMPLE NURSING FACILITY	NSGO	Rural
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	Variable Number	[100]	[101]	[102]	[104]	[105]	[109]	[112]	[107]	[108]	[110]	[115]
3	EXAMPLE	MD	2015	NF	RUGs	RE03045	1234567890	210000	40534954	EXAMPLE NURSING FACILITY	NSGO	Rural
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2	Database Description &	State	State Demonstration Rate Year	Service Type	Demonstration Type	Other State Provider ID Number	National Provider ID (NPI)	Medicare Certification Number (Medicare ID)	State-specific Provider ID (Medicaid ID)	Provider Name	Ownership Category Type	Urban / Rural Location
	Variable Number	[100]	[101]	[102]	[104]	[105]	[109]	[112]	[107]	[108]	[110]	[115]
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	Variable Number	[100]	[101]	[102]	[104]	[105]	[109]	[112]	[107]	[108]	[110]	[115]
3	EXAMPLE	MD	2015	NF	RUGs	RE03045	1234567890	210000	40534954	EXAMPLE NURSING FACILITY	NSGO	Rural
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	Database Description &	State	State Demonstration Rate Year	Service Type	Demonstration Type	Other State Provider ID Number	National Provider ID (NPI)	Medicare Certification Number (Medicare ID)	State-specific Provider ID (Medicaid ID)	Provider Name	Ownership Category Type	Urban / Rural Location
	Variable Number	[100]	[101]	[102]	[104]	[105]	[109]	[112]	[107]	[108]	[110]	[115]
3	EXAMPLE	MD	2015	NF	RUGs	RE03045	1234567890	210000	40534954	EXAMPLE NURSING FACILITY	NSGO	Rural
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2	Medicare RUGs Type / Version	Medicare RUGs Rate - Effective Begin Date	Medicare RUGs Rate - Effective End Date	Medicare Days	Average Medicare RUGs Rate Per Diem	Adjustment #1 to RUGs Rate	Adjustment #2 to RUGs Rate	Adjusted Medicare RUGs Per Diem	Time Period of Medicaid Days - Begin Date	Time Period of Medicaid Days - End Date	Medicaid Days	Time Period of Medicaid Rates - Begin Date	Time Period of Medicaid Rates - End Date
	[217]	[218.1]	[218.2]	[210]	[216]	[219.1]	[219.2]	[222]	[300.1]	[300.2]	[310]	[311.1]	[311.2]
3	66	10/1/2013	9/30/2014	2,523	\$314.22	\$1.56	\$0.00	\$315.78	7/1/2012	6/30/2013	3,124	7/1/2014	6/30/2015
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2	Medicare RUGs Type / Version	Medicare RUGs Rate - Effective Begin Date	Medicare RUGs Rate - Effective End Date	Medicare Days	Average Medicare RUGs Rate Per Diem	Adjustment #1 to RUGs Rate	Adjustment #2 to RUGs Rate	Adjusted Medicare RUGs Per Diem	Time Period of Medicaid Days - Begin Date	Time Period of Medicaid Days - End Date	Medicaid Days	Time Period of Medicaid Rates - Begin Date	Time Period of Medicaid Rates - End Date
	[217]	[218.1]	[218.2]	[210]	[216]	[219.1]	[219.2]	[222]	[300.1]	[300.2]	[310]	[311.1]	[311.2]
3	66	10/1/2013	9/30/2014	2,523	\$314.22	\$1.56	\$0.00	\$315.78	7/1/2012	6/30/2013	3,124	7/1/2014	6/30/2015
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2	Medicare RUGs Type / Version	Medicare RUGs Rate - Effective Begin Date	Medicare RUGs Rate - Effective End Date	Medicare Days	Average Medicare RUGs Rate Per Diem	Adjustment #1 to RUGs Rate	Adjustment #2 to RUGs Rate	Adjusted Medicare RUGs Per Diem	Time Period of Medicaid Days - Begin Date	Time Period of Medicaid Days - End Date	Medicaid Days	Time Period of Medicaid Rates - Begin Date	Time Period of Medicaid Rates - End Date
	[217]	[218.1]	[218.2]	[210]	[216]	[219.1]	[219.2]	[222]	[300.1]	[300.2]	[310]	[311.1]	[311.2]
3	66	10/1/2013	9/30/2014	2,523	\$314.22	\$1.56	\$0.00	\$315.78	7/1/2012	6/30/2013	3,124	7/1/2014	6/30/2015
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2	Medicare RUGs Type / Version	Medicare RUGs Rate - Effective Begin Date	Medicare RUGs Rate - Effective End Date	Medicare Days	Average Medicare RUGs Rate Per Diem	Adjustment #1 to RUGs Rate	Adjustment #2 to RUGs Rate	Adjusted Medicare RUGs Per Diem	Time Period of Medicaid Days - Begin Date	Time Period of Medicaid Days - End Date	Medicaid Days	Time Period of Medicaid Rates - Begin Date	Time Period of Medicaid Rates - End Date
	[217]	[218.1]	[218.2]	[210]	[216]	[219.1]	[219.2]	[222]	[300.1]	[300.2]	[310]	[311.1]	[311.2]
3	66	10/1/2013	9/30/2014	2,523	\$314.22	\$1.56	\$0.00	\$315.78	7/1/2012	6/30/2013	3,124	7/1/2014	6/30/2015
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2	Medicare RUGs Type / Version	Medicare RUGs Rate - Effective Begin Date	Medicare RUGs Rate - Effective End Date	Medicare Days	Average Medicare RUGs Rate Per Diem	Adjustment #1 to RUGs Rate	Adjustment #2 to RUGs Rate	Adjusted Medicare RUGs Per Diem	Time Period of Medicaid Days - Begin Date	Time Period of Medicaid Days - End Date	Medicaid Days	Time Period of Medicaid Rates - Begin Date	Time Period of Medicaid Rates - End Date
	[217]	[218.1]	[218.2]	[210]	[216]	[219.1]	[219.2]	[222]	[300.1]	[300.2]	[310]	[311.1]	[311.2]
3	66	10/1/2013	9/30/2014	2,523	\$314.22	\$1.56	\$0.00	\$315.78	7/1/2012	6/30/2013	3,124	7/1/2014	6/30/2015
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2	Medicare RUGs Type / Version	Medicare RUGs Rate - Effective Begin Date	Medicare RUGs Rate - Effective End Date	Medicare Days	Average Medicare RUGs Rate Per Diem	Adjustment #1 to RUGs Rate	Adjustment #2 to RUGs Rate	Adjusted Medicare RUGs Per Diem	Time Period of Medicaid Days - Begin Date	Time Period of Medicaid Days - End Date	Medicaid Days	Time Period of Medicaid Rates - Begin Date	Time Period of Medicaid Rates - End Date
	[217]	[218.1]	[218.2]	[210]	[216]	[219.1]	[219.2]	[222]	[300.1]	[300.2]	[310]	[311.1]	[311.2]
3	66	10/1/2013	9/30/2014	2,523	\$314.22	\$1.56	\$0.00	\$315.78	7/1/2012	6/30/2013	3,124	7/1/2014	6/30/2015
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2	Medicare RUGs Type / Version	Medicare RUGs Rate - Effective Begin Date	Medicare RUGs Rate - Effective End Date	Medicare Days	Average Medicare RUGs Rate Per Diem	Adjustment #1 to RUGs Rate	Adjustment #2 to RUGs Rate	Adjusted Medicare RUGs Per Diem	Time Period of Medicaid Days - Begin Date	Time Period of Medicaid Days - End Date	Medicaid Days	Time Period of Medicaid Rates - Begin Date	Time Period of Medicaid Rates - End Date
	[217]	[218.1]	[218.2]	[210]	[216]	[219.1]	[219.2]	[222]	[300.1]	[300.2]	[310]	[311.1]	[311.2]
3	66	10/1/2013	9/30/2014	2,523	\$314.22	\$1.56	\$0.00	\$315.78	7/1/2012	6/30/2013	3,124	7/1/2014	6/30/2015
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	Medicaid Regular Payment Per Diem	Medicaid	Medicaid	Medicaid	Adjustment to	Adjustment to Medicaid Per Diem	Total Medicaid Regular
2	Payment Per Diem	Supplemental	Supplemental	Supplemental	Medicaid Per Diem	Medicaid Per Diem	and Supplemental Per
		Payment Per Diem	Payment Per Diem	Payment Per Diem	#1	#2	Diem with Adjustments
			(GME/Training)	(Other)			
	[040]	[040.4]	[313.2]	[313.3]	[04.4.4]	[0440]	[047]
	[312]	[313.1]	[313.2]	[313.3]	[314.1]	[314.2]	[317]
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3	\$185.00	\$4.80	\$4.80	\$4.80	\$1.20	\$0.00	\$200.60
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	Medicaid Regular	Medicaid	Medicaid	Medicaid	Adjustment to	Adjustment to	Total Medicaid Regular
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		Payment Per Diem	Payment Per Diem	Payment Per Diem	#1	#2	Diem with Adjustments
			(GME/Training)	(Other)			
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	[312]	[313.1]	[313.2]	[313.3]	[314.1]	[314.2]	[317]
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3	\$185.00	\$4.80	\$4.80	\$4.80	\$1.20	\$0.00	\$200.60
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	Medicaid Regular	Medicaid	Medicaid	Medicaid	Adjustment to	Adjustment to	Total Medicaid Regular
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		Payment Per Diem	Payment Per Diem	Payment Per Diem	#1	#2	Diem with Adjustments
			(GME/Training)	(Other)			
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	[312]	[313.1]	[313.2]	[313.3]	[314.1]	[314.2]	[317]
$\vdash$							
3	\$185.00	\$4.80	\$4.80	\$4.80	\$1.20	\$0.00	\$200.60
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	MCD Payment and Utilization Info:	MCD Payment and Utilization Info:	MCD Payment and Utilization Info:	MCD Payment and Utilization Info:	MCD Payment and Utilization Info:	MCD Payment and Utilization Info:	MCD Payment and Utilization Info:
2	Medicaid Regular Payment Per Diem	Medicaid Supplemental Payment Per Diem	Medicaid Supplemental Payment Per Diem (GME/Training)	Medicaid Supplemental Payment Per Diem (Other)	Adjustment to Medicaid Per Diem #1	Adjustment to Medicaid Per Diem #2	Total Medicaid Regular and Supplemental Per Diem with Adjustments
	[312]	[313.1]	[313.2]	[313.3]	[314.1]	[314.2]	[317]
3	\$185.00	\$4.80	\$4.80	\$4.80	\$1.20	\$0.00	\$200.60
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	Medicaid Regular	Medicaid	Medicaid	Medicaid	Adjustment to	Adjustment to	Total Medicaid Regular
2	Payment Per Diem	Supplemental	Supplemental	Supplemental	Medicaid Per Diem	Medicaid Per Diem	and Supplemental Per
		Payment Per Diem	Payment Per Diem	Payment Per Diem	#1	#2	Diem with Adjustments
			(GME/Training)	(Other)			
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	[312]	[313.1]	[313.2]	[313.3]	[314.1]	[314.2]	[317]
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3	\$185.00	\$4.80	\$4.80	\$4.80	\$1.20	\$0.00	\$200.60
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2	Medicaid Regular Payment Per Diem	Medicaid Supplemental Payment Per Diem	Medicaid Supplemental Payment Per Diem (GME/Training)	Medicaid Supplemental Payment Per Diem (Other)	Adjustment to Medicaid Per Diem #1	Adjustment to Medicaid Per Diem #2	Total Medicaid Regular and Supplemental Per Diem with Adjustments
	[312]	[313.1]	[313.2]	[313.3]	[314.1]	[314.2]	[317]
3	\$185.00	\$4.80	\$4.80	\$4.80	\$1.20	\$0.00	\$200.60
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2	Medicaid Regular Payment Per Diem	Medicaid Supplemental Payment Per Diem	Medicaid Supplemental Payment Per Diem (GME/Training)	Medicaid Supplemental Payment Per Diem (Other)	Adjustment to Medicaid Per Diem #1	Adjustment to Medicaid Per Diem #2	Total Medicaid Regular and Supplemental Per Diem with Adjustments
	[312]	[313.1]	[313.2]	[313.3]	[314.1]	[314.2]	[317]
3	\$185.00	\$4.80	\$4.80	\$4.80	\$1.20	\$0.00	\$200.60
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2	MCD Inflation Factor Type	MCD Inflation Factor	Other Adjustment to Medicaid Payments	i ci biciii	Total Medicaid Payments	UPL Inflation Factor Type	UPL Inflation Factor	Inflated / Adjusted UPL Per Diem	Inflated UPL Amount - UPL Per Diem * Medicaid Days	Other Adjustments to the UPL Amount	Adjusted Medicaid UPL Amount	UPL Gap Amount	Adjustment to the UPL Gap	Adjusted UPL Gap
	[307]	[308]	[309]	[315]	[316]	[404]	[405]	[400]	[406]	[402]	[403]	[407]	[408]	[409]
3	None	1.000	1.000	\$200.60	\$626,674	Market Basket	1.055	\$333.15	\$1,040,754	\$0	\$1,040,754	\$1,040,553	<b>\$</b> 0	\$1,040,553
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2	MCD Inflation Factor Type	MCD Inflation Factor	Other Adjustment to Medicaid Payments	1	Total Medicaid Payments	UPL Inflation Factor Type	UPL Inflation Factor	Inflated / Adjusted UPL Per Diem	Inflated UPL Amount - UPL Per Diem * Medicaid Days	Other Adjustments to the UPL Amount	Adjusted Medicaid UPL Amount	UPL Gap Amount	Adjustment to the UPL Gap	Adjusted UPL Gap
	[307]	[308]	[309]	[315]	[316]	[404]	[405]	[400]	[406]	[402]	[403]	[407]	[408]	[409]
3	None	1.000	1.000	\$200.60	\$626,674	Market Basket	1.055	\$333.15	\$1,040,754	\$0	\$1,040,754	\$1,040,553	<b>\$</b> 0	\$1,040,553
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2	MCD Inflation Factor Type	MCD Inflation Factor	Other Adjustment to Medicaid Payments	Inflated / Adjusted Medicaid Payment Per Diem	Total Medicaid Payments	UPL Inflation Factor Type	UPL Inflation Factor	Inflated / Adjusted UPL Per Diem	Inflated UPL Amount - UPL Per Diem * Medicaid Days	Other Adjustments to the UPL Amount	Adjusted Medicaid UPL Amount	UPL Gap Amount	Adjustment to the UPL Gap	Adjusted UPL Gap
	[307]	[308]	[309]	[315]	[316]	[404]	[405]	[400]	[406]	[402]	[403]	[407]	[408]	[409]
3	None	1.000	1.000	\$200.60	\$626,674	Market Basket	1.055	\$333.15	\$1,040,754	\$0	\$1,040,754	\$1,040,553	<b>\$</b> 0	\$1,040,553
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	MCD Inflated Payment Info:	MCD Inflated Payment Info:	MCD Inflated Payment Info:	MCD Inflated Payment Info:	MCD Inflated Payment Info:	UPL Calc Info:	UPL Calc Info:	UPL Calc Info:	UPL Calc Info:	UPL Adjustment Info:	UPL Adjustment Info:	UPL Gap Info:	UPL Gap Info:	UPL Gap Info:
2	MCD Inflation Factor Type	MCD Inflation Factor	Other Adjustment to Medicaid Payments	Inflated / Adjusted Medicaid Payment Per Diem	Total Medicaid Payments	UPL Inflation Factor Type	UPL Inflation Factor	Inflated / Adjusted UPL Per Diem	Inflated UPL Amount - UPL Per Diem * Medicaid Days	Other Adjustments to the UPL Amount	Adjusted Medicaid UPL Amount	UPL Gap Amount	Adjustment to the UPL Gap	Adjusted UPL Gap
	[307]	[308]	[309]	[315]	[316]	[404]	[405]	[400]	[406]	[402]	[403]	[407]	[408]	[409]
3 151 152 153	None	1.000	1.000	\$200.60	\$626,674	Market Basket	1.055	\$333.15	\$1,040,754	\$0	\$1,040,754	\$1,040,553	<b>\$</b> 0	\$1,040,553
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	MCD Inflated Payment Info:	MCD Inflated Payment Info:	MCD Inflated Payment Info:	MCD Inflated Payment Info:	MCD Inflated Payment Info:	UPL Calc Info:	UPL Calc Info:	UPL Calc Info:	UPL Calc Info:	UPL Adjustment Info:	UPL Adjustment Info:	UPL Gap Info:	UPL Gap Info:	UPL Gap Info:
2	MCD Inflation Factor Type	MCD Inflation Factor	Other Adjustment to Medicaid Payments	Inflated / Adjusted Medicaid Payment Per Diem	Total Medicaid Payments	UPL Inflation Factor Type	UPL Inflation Factor	Inflated / Adjusted UPL Per Diem	Inflated UPL Amount - UPL Per Diem * Medicaid Days	Other Adjustments to the UPL Amount	Adjusted Medicaid UPL Amount	UPL Gap Amount	Adjustment to the UPL Gap	Adjusted UPL Gap
	[307]	[308]	[309]	[315]	[316]	[404]	[405]	[400]	[406]	[402]	[403]	[407]	[408]	[409]
3	None	1.000	1.000	\$200.60	\$626,674	Market Basket	1.055	\$333.15	\$1,040,754	\$0	\$1,040,754	\$1,040,553	\$0	\$1,040,553
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	MCD Inflated Payment Info:	MCD Inflated Payment Info:	MCD Inflated Payment Info:	MCD Inflated Payment Info:	MCD Inflated Payment Info:	UPL Calc Info:	UPL Calc Info:	UPL Calc Info:	UPL Calc Info:	UPL Adjustment Info:	UPL Adjustment Info:	UPL Gap Info:	UPL Gap Info:	UPL Gap Info:
2	MCD Inflation Factor Type	MCD Inflation Factor	Other Adjustment to Medicaid Payments	Inflated / Adjusted Medicaid Payment Per Diem	Total Medicaid Payments	UPL Inflation Factor Type	UPL Inflation Factor	Inflated / Adjusted UPL Per Diem	Inflated UPL Amount - UPL Per Diem * Medicaid Days	Other Adjustments to the UPL Amount	Adjusted Medicaid UPL Amount	UPL Gap Amount	Adjustment to the UPL Gap	Adjusted UPL Gap
	[307]	[308]	[309]	[315]	[316]	[404]	[405]	[400]	[406]	[402]	[403]	[407]	[408]	[409]
3	None	1.000	1.000	\$200.60	\$626,674	Market Basket	1.055	\$333.15	\$1,040,754	\$0	\$1,040,754	\$1,040,553	<b>\$</b> 0	\$1,040,553
249 250														
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## Nursing Facility Upper Payment Limit (UPL) Data Template

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	MCD Inflated Payment Info:	MCD Inflated Payment Info:	MCD Inflated Payment Info:	MCD Inflated Payment Info:	MCD Inflated Payment Info:	UPL Calc Info:	UPL Calc Info:	UPL Calc Info:	UPL Calc Info:	UPL Adjustment Info:	UPL Adjustment Info:	UPL Gap Info:	UPL Gap Info:	UPL Gap Info:
2	MCD Inflation Factor Type	MCD Inflation Factor	Other Adjustment to Medicaid Payments	Inflated / Adjusted Medicaid Payment Per Diem	Total Medicaid Payments	UPL Inflation Factor Type	UPL Inflation Factor	Inflated / Adjusted UPL Per Diem	Inflated UPL Amount - UPL Per Diem * Medicaid Days	Other Adjustments to the UPL Amount	Adjusted Medicaid UPL Amount	UPL Gap Amount	Adjustment to the UPL Gap	Adjusted UPL Gap
	[307]	[308]	[309]	[315]	[316]	[404]	[405]	[400]	[406]	[402]	[403]	[407]	[408]	[409]
3	None	1.000	1.000	\$200.60	\$626,674	Market Basket	1.055	\$333.15	\$1,040,754	\$0	\$1,040,754	\$1,040,553	\$0	\$1,040,553
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Demo Info:	Provider Info: Provider Name [108]	Provider Info:  Ownership Category Type	Provider Info: Urban / Rural Location
Database Description & [100] [101] [102] [104] [105] [109] [112] [107]		Ownership Category Type	Urban / Rural Location
[100] [101] [102] [104] [105] [109] [112] [107]	[108]		
Variable Number		[110]	[115]
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		Demo Info:	Demo Info:	Demo Info:	Demo Info:	Provider Info:		Provider Info:	Provider Info:	Provider Info:	Provider Info:	Provider Info:
2	Database Description &	State	State Demonstration Rate Year	Service Type	Demonstration Type	Other State Provider ID Number	National Provider ID (NPI)	Medicare Certification Number (Medicare ID)	State-specific Provider ID (Medicaid ID)	Provider Name	Ownership Category Type	Urban / Rural Location
	Variable Number	[100]	[101]	[102]	[104]	[105]	[109]	[112]	[107]	[108]	[110]	[115]
3	EXAMPLE	MD	2015	NF	Other	RA53433	1234567890	210000	65745234	EXAMPLE NURSING FACILITY	SGO	Urban
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2	Database Description &	State	State Demonstration Rate Year	Service Type	Demonstration Type	Other State Provider ID Number	National Provider ID (NPI)	Medicare Certification Number (Medicare ID)	State-specific Provider ID (Medicaid ID)	Provider Name	Ownership Category Type	Urban / Rural Location
	Variable Number	[100]	[101]	[102]	[104]	[105]	[109]	[112]	[107]	[108]	[110]	[115]
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Database   Description &   Rate Year	Category Type [110]	Location [115]
Variable Number         [100]         [101]         [102]         [104]         [105]         [109]         [112]         [107]         [108]           3         EXAMPLE         MD         2015         NF         Other         RA53433         1234567890         210000         65745234         EXAMPLE NURSING FACILITY           152         152         153         154         155         156         157         158         159         158         159         160         161         162         163         162         163         164         1		
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2	Database Description &	State	State Demonstration Rate Year	Service Type	Demonstration Type	Other State Provider ID Number	National Provider ID (NPI)	Medicare Certification Number (Medicare ID)	State-specific Provider ID (Medicaid ID)	Provider Name	Ownership Category Type	Urban / Rural Location
	Variable Number	[100]	[101]	[102]	[104]	[105]	[109]	[112]	[107]	[108]	[110]	[115]
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2	Database Description &	State	State Demonstration Rate Year	Service Type	Demonstration Type	Other State Provider ID Number	National Provider ID (NPI)	Medicare Certification Number (Medicare ID)	State-specific Provider ID (Medicaid ID)	Provider Name	Ownership Category Type	Urban / Rural Location
	Variable Number	[100]	[101]	[102]	[104]	[105]	[109]	[112]	[107]	[108]	[110]	[115]
3	EXAMPLE	MD	2015	NF	Other	RA53433	1234567890	210000	65745234	EXAMPLE NURSING FACILITY	SGO	Urban
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2	Database Description &	State	State Demonstration Rate Year	Service Type	Demonstration Type	Other State Provider ID Number	National Provider ID (NPI)	Medicare Certification Number	State-specific Provider ID (Medicaid ID)	Provider Name	Ownership Category Type	Urban / Rural Location
	Variable Number	[100]	[101]	[102]	[104]	[105]	[109]	(Medicare ID)	[107]	[108]	[110]	[115]
3	EXAMPLE	MD	2015	NF	Other	RA53433	1234567890	210000	65745234	EXAMPLE NURSING FACILITY	SGO	Urban
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2	Medicare Cost Report Begin Date	Medicare Cost Report End Date	Medicare Cost Report Filing Status	Medicare Per Diem	Adjustments to Medicare Per Diem #1	Adjustments to Medicare Per Diem #2	Adjusted Per Diem Payments	Medicare Case Mix Index (CMI)	Time Period of Medicaid Days - Begin Date	Time Period of Medicaid Days - End Date	Medicaid Days	Time Period of Medicaid Rates - Begin Date	Time Period of Medicaid Rates - End Date
	[200.1]	[200.2]	[202]	[211]	[212.1]	[212.2]	[222]	[207]	[300.1]	[300.2]	[310]	[311.1]	[311.2]
3	7/1/2012	6/30/2013	Filed	\$308.23	\$1.56	\$0.59	\$310.38	1.45	7/1/2012	6/30/2013	3,124	7/1/2014	6/30/2015
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	[200.1]	[200.2]	[202]	[211]	[212.1]	[212.2]	[222]	[207]	[300.1]	[300.2]	[310]	[311.1]	[311.2]
3	7/1/2012	6/30/2013	Filed	\$308.23	\$1.56	\$0.59	\$310.38	1.45	7/1/2012	6/30/2013	3,124	7/1/2014	6/30/2015
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2	Medicare Cost Report Begin Date	Medicare Cost Report End Date	Medicare Cost Report Filing Status	Medicare Per Diem	Adjustments to Medicare Per Diem #1	Adjustments to Medicare Per Diem #2	Adjusted Per Diem Payments	Medicare Case Mix Index (CMI)	Time Period of Medicaid Days - Begin Date	Time Period of Medicaid Days - End Date	Medicaid Days	Time Period of Medicaid Rates - Begin Date	Time Period of Medicaid Rates - End Date
	[200.1]	[200.2]	[202]	[211]	[212.1]	[212.2]	[222]	[207]	[300.1]	[300.2]	[310]	[311.1]	[311.2]
3	7/1/2012	6/30/2013	Filed	\$308.23	\$1.56	\$0.59	\$310.38	1.45	7/1/2012	6/30/2013	3,124	7/1/2014	6/30/2015
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2	Medicare Cost Report Begin Date	Medicare Cost Report End Date	Medicare Cost Report Filing Status	Medicare Per Diem	Adjustments to Medicare Per Diem #1	Adjustments to Medicare Per Diem #2	Adjusted Per Diem Payments	Medicare Case Mix Index (CMI)	Time Period of Medicaid Days - Begin Date	Time Period of Medicaid Days - End Date	Medicaid Days	Time Period of Medicaid Rates - Begin Date	Time Period of Medicaid Rates - End Date
	[200.1]	[200.2]	[202]	[211]	[212.1]	[212.2]	[222]	[207]	[300.1]	[300.2]	[310]	[311.1]	[311.2]
3	7/1/2012	6/30/2013	Filed	\$308.23	\$1.56	\$0.59	\$310.38	1.45	7/1/2012	6/30/2013	3,124	7/1/2014	6/30/2015
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2	Medicare Cost Report Begin Date	Medicare Cost Report End Date	Medicare Cost Report Filing Status	Medicare Per Diem	Adjustments to Medicare Per Diem #1	Adjustments to Medicare Per Diem #2	Adjusted Per Diem Payments	Medicare Case Mix Index (CMI)	Time Period of Medicaid Days - Begin Date	Time Period of Medicaid Days - End Date	Medicaid Days	Time Period of Medicaid Rates - Begin Date	Time Period of Medicaid Rates - End Date
	[200.1]	[200.2]	[202]	[211]	[212.1]	[212.2]	[222]	[207]	[300.1]	[300.2]	[310]	[311.1]	[311.2]
3	7/1/2012	6/30/2013	Filed	\$308.23	\$1.56	\$0.59	\$310.38	1.45	7/1/2012	6/30/2013	3,124	7/1/2014	6/30/2015
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2	Medicare Cost Report Begin Date	Medicare Cost Report End Date	Medicare Cost Report Filing Status	Medicare Per Diem	Adjustments to Medicare Per Diem #1	Adjustments to Medicare Per Diem #2	Adjusted Per Diem Payments	Medicare Case Mix Index (CMI)	Time Period of Medicaid Days - Begin Date	Time Period of Medicaid Days - End Date	Medicaid Days	Time Period of Medicaid Rates - Begin Date	Time Period of Medicaid Rates - End Date
	[200.1]	[200.2]	[202]	[211]	[212.1]	[212.2]	[222]	[207]	[300.1]	[300.2]	[310]	[311.1]	[311.2]
3	7/1/2012	6/30/2013	Filed	\$308.23	\$1.56	\$0.59	\$310.38	1.45	7/1/2012	6/30/2013	3,124	7/1/2014	6/30/2015
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2	Medicare Cost Report Begin Date	Medicare Cost Report End Date	Medicare Cost Report Filing Status	Medicare Per Diem	Adjustments to Medicare Per Diem #1	Adjustments to Medicare Per Diem #2	Adjusted Per Diem Payments	Medicare Case Mix Index (CMI)	Time Period of Medicaid Days - Begin Date	Time Period of Medicaid Days - End Date	Medicaid Days	Time Period of Medicaid Rates - Begin Date	Time Period of Medicaid Rates - End Date
	[200.1]	[200.2]	[202]	[211]	[212.1]	[212.2]	[222]	[207]	[300.1]	[300.2]	[310]	[311.1]	[311.2]
3	7/1/2012	6/30/2013	Filed	\$308.23	\$1.56	\$0.59	\$310.38	1.45	7/1/2012	6/30/2013	3,124	7/1/2014	6/30/2015
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2	Medicaid Regular Payment Per Diem	Medicaid Supplemental Payment Per Diem	Medicaid Supplemental Payment Per Diem (GME/Training)	Medicaid Supplemental Payment Per Diem (Other)	Adjustment to Medicaid Per Diem #1	Adjustment to Medicaid Per Diem #2	Total Medicaid Regular and Supplemental Per Diem with Adjustments	Medicaid Case Mix Index (CMI)
	[312]	[313.1]	[313.2]	[313.3]	[314.1]	[314.2]	[317]	[305]
3	\$275.34	\$4.80	\$4.80	\$4.80	\$1.20	\$0.00	\$290.94	1.28
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	[312]	[313.1]	[313.2]	[313.3]	[314.1]	[314.2]	[317]	[305]
3	\$275.34	\$4.80	\$4.80	\$4.80	\$1.20	\$0.00	\$290.94	1.28
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2	Medicaid Regular Payment Per Diem	Medicaid Supplemental Payment Per Diem	Medicaid Supplemental Payment Per Diem (GME/Training)	Medicaid Supplemental Payment Per Diem (Other)	Adjustment to Medicaid Per Diem #1	Adjustment to Medicaid Per Diem #2	Total Medicaid Regular and Supplemental Per Diem with Adjustments	Medicaid Case Mix Index (CMI)
	[312]	[313.1]	[313.2]	[313.3]	[314.1]	[314.2]	[317]	[305]
3	\$275.34	\$4.80	\$4.80	\$4.80	\$1.20	\$0.00	\$290.94	1.28
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2	Medicaid Regular Payment Per Diem	Medicaid Supplemental Payment Per Diem	Medicaid Supplemental Payment Per Diem (GME/Training)	Medicaid Supplemental Payment Per Diem (Other)	Adjustment to Medicaid Per Diem #1	Adjustment to Medicaid Per Diem #2	Total Medicaid Regular and Supplemental Per Diem with Adjustments	Medicaid Case Mix Index (CMI)
	[312]	[313.1]	[313.2]	[313.3]	[314.1]	[314.2]	[317]	[305]
3	\$275.34	\$4.80	\$4.80	\$4.80	\$1.20	\$0.00	\$290.94	1.28
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	[312]	[313.1]	[313.2]	[313.3]	[314.1]	[314.2]	[317]	[305]
3	\$275.34	\$4.80	\$4.80	\$4.80	\$1.20	\$0.00	\$290.94	1.28
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	[312]	[313.1]	[313.2]	[313.3]	[314.1]	[314.2]	[317]	[305]
3	\$275.34	\$4.80	\$4.80	\$4.80	\$1.20	\$0.00	\$290.94	1.28
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	[312]	[313.1]	[313.2]	[313.3]	[314.1]	[314.2]	[317]	[305]
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2	MCD Inflation Factor Type	MCD Inflation Factor	Other Adjustment to Medicaid Payments	Inflated / Adjusted Medicaid Payment Per Diem	Total Medicaid Payments	Calculated Medicaid UPL Per-diem	UPL Inflation Factor Type	UPL Inflation Factor	Inflated / Adjusted UPL Per Diem	Inflated UPL Amount - UPL Per Diem * Medicaid Days	Other Adjustments to the UPL Amount	Adjusted Medicaid UPL Amount	UPL Gap Amount	Adjustment to the UPL Gap
	[307]	[308]	[309]	[315]	[316]	[410]	[404]	[405]	[400]	[406]	[402]	[403]	[407]	[408]
3	None	1.000	1.000	\$290.94	\$908,897	\$273.99	Market Basket	1.055	\$289.06	\$903,024	\$0	\$903,024	-\$5,873	<b>\$</b> 0
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	[307]	[308]	[309]	[315]	[316]	[410]	[404]	[405]	[400]	[406]	[402]	[403]	[407]	[408]
3	None	1.000	1.000	\$290.94	\$908,897	\$273.99	Market Basket	1.055	\$289.06	\$903,024	\$0	\$903,024	-\$5,873	<b>\$</b> 0
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	[307]	[308]	[309]	[315]	[316]	[410]	[404]	[405]	[400]	[406]	[402]	[403]	[407]	[408]
3	None	1.000	1.000	\$290.94	\$908,897	\$273.99	Market Basket	1.055	\$289.06	\$903,024	\$0	\$903,024	-\$5,873	\$0
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	[307]	[308]	[309]	[315]	[316]	[410]	[404]	[405]	[400]	[406]	[402]	[403]	[407]	[408]
3	None	1.000	1.000	\$290.94	\$908,897	\$273.99	Market Basket	1.055	\$289.06	\$903,024	\$0	\$903,024	-\$5,873	<b>\$</b> 0
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	[307]	[308]	[309]	[315]	[316]	[410]	[404]	[405]	[400]	[406]	[402]	[403]	[407]	[408]
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2	MCD Inflation Factor Type	MCD Inflation Factor	Other Adjustment to Medicaid Payments	Inflated / Adjusted Medicaid Payment Per Diem	Total Medicaid Payments	Calculated Medicaid UPL Per-diem	UPL Inflation Factor Type	UPL Inflation Factor	Inflated / Adjusted UPL Per Diem	Inflated UPL Amount - UPL Per Diem * Medicaid Days	Other Adjustments to the UPL Amount	Adjusted Medicaid UPL Amount	UPL Gap Amount	Adjustment to the UPL Gap
	[307]	[308]	[309]	[315]	[316]	[410]	[404]	[405]	[400]	[406]	[402]	[403]	[407]	[408]
3	None	1.000	1.000	\$290.94	\$908,897	\$273.99	Market Basket	1.055	\$289.06	\$903,024	\$0	\$903,024	-\$5,873	\$0
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